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PTO/SB/01 (12-97)

Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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## 05918P2 USA Attorney Docket Number **DECLARATION FOR UTILITY OR** David Allen Roberts First Named Inventor DESIGN COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number May 3, 2001 Filing Date □ Declaration □ Declaration OR Submitted after Initial Submitted Group Art Unit with Initial Filing (surcharge (37 ČFR 1.16 (e)) Filing **Examiner Name** required) As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint invento - r (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled ow VOC Cleanroom Cleaning Wipe the specification of which (Title of the Invention) $\boxtimes$ is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 385(b) of any foreign application(a) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. **Certified Copy Attached? Prior Foreign Application** Foreign Filling Date **Priority** Country (MM/DD/YYYY) Not Claimed Number(s) YES 8 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. Application Number(s) Filing Date (MM/DD/YYYY) 05/07/1999

[Page 1 of 2]

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## **DECLARATION** — Utility or Design Patent Application

						-						
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application. Insofar as the subject matter of each of the claims of this application is not discussed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the office of the information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application.												
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Name of Sole or F	irst Inventor	:					petitio	n has been	filed for this	unsigned inve	ntor	
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David Allen					Roberts							
inventor's Signature	unest	ХИ	tid	, بر						Date		
Residence: City	Encinitas State CA			Country USA Citizenship USA					USA			
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## **DECLARATION**

## **ADDITIONAL INVENTOR(S)** Supplemental Sheet Page \_\_\_\_\_ of \_\_\_\_

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor											
Given Name (first and middle [if any])					Family Name or Surname						
John Anthony					Ма	rsella					
inventor's Signature	unexecu	ted						Date			
Residence: City	Allentown	State	PA	c	ountry	USA		Citizens	thip (	JSA	
Post Office Address	744 N. Broad St.										
Post Office Address	85										
City	Allentown	State	PA		ZIP	18104	Country	USA			
Name of Addition	nai Joint Inventor, if a	ny:			A petitio	n has been file	d for th	nis unsig	ned in	ventor	
Given Na	me (first and middle [if an	y])		$\perp$		Family Nan	ne or S	Sumame			
Robert I	bert Edward Stevens										
inventor's Signature	unexecute	d	_						ite		
Residence: City	Wescosville	State	РА	_ c	ountry	USA		Citize	nship	USA	
Post Office Address	5400 Celia Drive										
Post Office Address											
City	Wescosville	State	РА		ZIP	18106	Cour	n <b>try</b> U	SA		
Name of Addition	Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any]) Family Name or Surname											
Inventor's Signature							Da	Date			
Residence: City	State				Country				Citizenship		
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